



12-7-06

JFW

EXPRESS MAIL NO. EV887976080US

**TRANSMITTAL
FORM***(To be used for all correspondence
after initial filing)*

Application Number	10/623,474
Filing Date	July 18, 2003
First Named Inventor	Paolino Schillaci
Art Unit	2186
Examiner Name	Tuan V. Thai
Attorney Docket No.	856063.743

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to TC (<i>Appeal Notice, Brief, Reply Brief</i>)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Declaration	<input checked="" type="checkbox"/> Other Enclosure(s) (<i>please identify below</i>):
<input type="checkbox"/> Information Disclosure Statement and Transmittal	<input type="checkbox"/> Statement under 37 CFR 3.73(b)	<u>Change of Correspondence</u>
<input type="checkbox"/> Cited References	<input type="checkbox"/> Terminal Disclaimer	<u>Address Application</u>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	_____
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> CD, Number of CD(s) _____	_____
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	_____

Remarks**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number	38106
Signature			
Printed Name	David V. Carlson		
Date	December 4, 2006	Reg. No.	31,153

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	** SENT VIA EXPRESS MAIL **	
Typed or printed name		Date:

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
872467_1.DOC



CHANGE OF CORRESPONDENCE ADDRESS Application		
Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/623,474
	Filing Date	July 18, 2003
	First Named Inventor	Paolino Schillaci
	Art Unit	2186
	Examiner Name	Tuan V. Thai
	Attorney Docket Number	856063.743

Please change the Correspondence Address for the above-identified application to:

☒ Customer Number

OR

<input type="checkbox"/> Firm or Individual Name					
Address					
Address					
City		State		ZIP	
Country					
Telephone			Email		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☐ Applicant/Inventor.
- ☐ Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96.)
- ☒ Attorney or Agent of record. Registration Number 31,153
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

Typed or
Printed Name

David V. Carlson

Date

December 4, 2006

Telephone 206-622-4900

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*

☐ *Total of _____ forms are submitted.